

IBM mainfrm.rsf - Reflection - IBM 3270 Terminal

File Edit Connection Setup Macro Window Help

DMW PROD DETAIL ORDER ENTRY DEBIT 12/07/05

CNTL 90011000602 CL 011 DC 51

QTY LIST NET AMERISOURCEBERGEN DRUG CO

LIT ROUTING: FGC 4 350 RMY 5

PRCE TYP BID 24903 AVENUE KEARNY

DISC MOC CRD DSB SHP VALENCIA CA 91355

PO# TEST POD 120705 TRM H 2%/30 N/31

CHG1 CHG2 INTNL - INV S>

TOT \$858.24 WHOLESALE ORDER - WGT 2.3 0>

001 606005 GLUCOPHAGE 500MG TABS 100 12 71.52D 40372

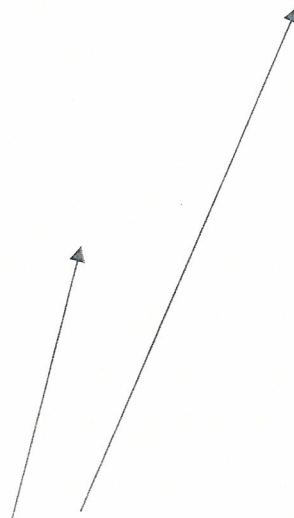
KEY DATA, HIT ENTER OR: PF24=COMPLETE, PF6=PRICE, PF7=BWD, PF8=FWD, PF9=PFKEYS

3, 7

IBM 3270 Terminal - pmvs.sby.stf.bms.com via Telnet

Start Lot... Inb... ma... Mic... Em... Do... 2:24 PM

Order details for 12 units of list 606005 are entered. List price of \$71.52 (D=list price)



COPS System Screens

2. Order with above product with pricing displayed

dyt INVOICE RETRIEVAL 10/09/06
PAGE 1 OF 4

S AMERISOURCE THOROFARE DV S AMERISOURCE THOROFARE DV
H T O T
I O 100 FRIARS LANE L O 100 FRIARS LANE
P THOROFARE NJ 08086 D THOROFARE NJ 08086

CUSTOMER	INVOICE	HH DD YY	TERMS	CUSTOMER PO NUMBER	O/S	DC	PICK DOC	INVOICE TOTAL	INVOICE ??? OF ???
90009900309	179019	08 21 06	2%/30 N/31	056334912	19	51	7379559	319,212.81	

CASES	CASE PK	UNITS	TOT QTY	LIST NO	SIZE	DESCRIPTION	DIV TYP	GROSS	NET UNIT	DISCOUNT	TAX	NET AMT
"ABILIFY IS SOLD AND DISTRIBUTED ON BEHALF OF OTSUKA AMERICA PHARMACEUTICAL, INC."												
"PRICE MAY BE SUBJECT TO REBATE VIA CREDIT INVOICE UNDER INVENTORY MANAGEMENT AGREEMENT."												
HEAT SENSITIVE ITEMS ON THIS ORDER												
***** SPECIAL HANDLING - SEE PROCEDURE D107 *****												
3	24	72	000813	1X30		ABILIFY 10MG TB 1X30 BTL	PC D	307.50	307.50			22140.00
2	24	48	000913	1X30		ABILIFY 15MG TB 1X30 BTL	PC D	307.50	307.50			14760.00
1	24	24	001013	1X30		ABILIFY 20MG TB 1X30 BTL	PC D	434.85	434.85			10436.40
2	24	48	001113	1X30		ABILIFY 30MG TB 1X30 BTL	PC D	434.85	434.85			20872.80
2	24	48	000713	1X30		ABILIFY 5MG TABS	PC D	307.50	307.50			14760.00
6	12	72	277531	1X30		AVALIDE TAB 150/12.5MG 30	PC D	54.24	54.24			3905.28
3	12	36	277532	1X90		AVALIDE TAB 150/12.5MG 90	PC D	162.66	162.66			5855.76
2	12	24	278831	1X30		AVALIDE TAB 300/25MG 30BT	PC D	63.65	63.65			1527.60
4	12	48	277631	1X30		AVALIDE TABS 300/12.5MG	PC D	57.97	57.97			2782.56
2	12	24	277632	1X90		AVALIDE TABS 300/12.5MG	PC D	173.93	173.93			4174.32

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PF1=INV HDR, PF7=PREV, PF6=NEXT, PF8=PRINT, PF10=AUDIT, PF11=FAX, PF12=MENU

dvr

INVOICE RETRIEVAL

PAGE

S	AMERISOURCE THOROFARE DV				S	AMERISOURCE THOROFARE DV			
H T					O T				
I O	100 FRIARS LANE				L O	100 FRIARS LANE			
P	THOROFARE NJ 08086				D	THOROFARE NJ 08086			

CUSTOMER	INVOICE	MM DD YY	TERMS	CUSTOMER PO NUMBER	O/S	DC	PICK DOC	INVOICE TOTAL	INVOIC
90009900309	179019	08 21 06	2%/30 N/31	056334912	19	51	7379559	319,212.81	

CASES	CASE PK	UNITS	TOT QTY	LIST NO	SIZE	DESCRIPTION	DIV	TYP	GROSS	NET UNIT	DISCOUNT	TA
6	12		72	277231	1X30	AVAPRO 150MG TAB	PC	D	43.99	43.99		
4	12		48	277232	1X90	AVAPRO 150MG TAB	PC	D	132.00	132.00		
1	10		10	277235	100	AVAPRO 150MG TB BLST	PC	D	146.66	146.66		
2	12		24	277331	1X30	AVAPRO 300MG TAB	PC	D	52.89	52.89		
3	12		36	277332	1X90	AVAPRO 300MG TAB	PC	D	158.65	158.65		
	12	5	5	082481	1X60	BUSPAR 30MG DIVI TAB 60 B	PC	D	220.33	220.33		
1	80		80	050541	VL	CYTOXAN PINJ 1X1G VIAL	BMO	D	23.10	23.10		
1	12		12	050401	100	CYTOXAN TABS 25MG	BMO	D	188.17	188.17		
2	12		24	606313	1X100	GLUCOPHAGE XR 500MG 100B	PC	D	75.92	75.92		
1	12		12	606005	100	GLUCOPHAGE 500MG TABS	PC	D	74.38	74.38		
	48	3	3	083050	100	HYDREA CAPS 500MG	BMO	D	113.54	113.54		
15	24		360	029305	1ML	KENALOG I.M.-40 MG. 1 CC	APD	D	5.98	5.98		
2	24		48	029320	5ML	KENALOG-40 INJECTION	APD	D	30.36	30.36		
1	24		24	029328	10ML	KENALOG-40 INJECTION	APD	D	45.34	45.34		
1	12		12	571208	225GM	LAC-HYDRIN 12% LOTION NO	MMS	D	34.87	34.87		
	300	20	20	356302	1	HESNEX 1GM MULTIDOSE VIAL	BMO	D	175.41	175.41		

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